## Summer 2007 AIMS HS Administration - Registration Form

Please refer to Summer 2007 AIMS HS Administration - Registration Form Directions. Incorrectly completed registration forms will not be processed.

Stu	Student Name (last, first) SAIS ID #				
School District					
District Test Coordinator NamePhone #					
Dis	istrict Test Coordinator Mailing Address				
Cim	ingle the commonwiate recommence				
1.	ircle the appropriate responses.  Has the student graduated from high school or will the student graduate prior to Jul	v 23 2007 P	Yes	No	
2.		•	Yes	No	
3.		O	Yes	No	
	3a. If the answer to question 3 is "No," has the student passed AIMS HS Writing v	vith augmentation?	Yes	No	
	3b. If the answer to question 3a is "No," explain.				
4	Has the student passed ATMS US Pending		Yes	No	
4.	Has the student passed AIMS HS Reading?  4a. If the answer to question 4 is "No," has the student passed AIMS HS Reading of the student passed AIM	with augmentation?		No	
	4b. If the answer to question 4a is "No," explain.	_	168	140	
5.	Has the student passed AIMS HS Mathematics?		Yes	No	
	5a. If the answer to question 5 is "No," has the student passed AIMS HS Mathematics	with augmentation?	Yes	No	
	5b. If the answer to question 5a is "No," explain.				
6.	Has the student passed any qualifying test from another state?		Yes	No	
0.	If the answer above is "Yes," see directions for required additional documentation.		105	140	
7.			Yes	No	
	If the answer above is "Yes," see directions for required additional documentation.			- 1.0	
8.	v i		Yes	No	
	If the answer above is "Yes," see directions for required additional documentation.				
9.	Is the student an English Language Learner?		Yes	No	
10.	). Describe the summer remediation program the student is participating in.				
11.	1. Has the student received a copy of the Summer 2007 AIMS HS Administration - Testin	g Center Rules?	Yes	No	
	2. Attach a copy of a completed augmentation worksheet.				
Circle the content area(s) to be tested.					
Wr	/riting – Mon., July 23rd, 9:30 AM Reading – Tue., July 24th, 9:30 AM	Mathematics – Wed	l., July 25 <sup>t</sup>	h, 9:30 AM	
Cir	ircle one testing center location.				
	Flagstaff Phoenix	Tucson			
To	o be completed by the student:				
	certify that this document has been completed correctly and accurately. I have reviewed the eli gi				
Administration and certify I am eligible to participate in the selected content areas of the Summer 2007 AIMS HS Administration. I have received a copy of the Summer 2007 AIMS HS Administration - Testing Center Rules and agree to abide by these rules.					
	gned	-			
Ü	o be completed by school or district staff member:				
	certify that this document has been completed correctly and accurately. I have reviewed the eligib	pility criteria for the Su	mmer 200	7 AIMS HS	
Adr	dministration and certify that this student is eligible to participate in the selected content areas of certify that the signature above is the signature of the student identified on this registration form.	the Summer 2007 AI			
_	gned				
Printed Name Title					
For ADE use only  July 23 – ID check Student Signature					
	July 24 – ID check Student Signature				
	ly 25 – ID check Student Signature				